



MARICOPA COUNTY ADOPT-A-HIGHWAY PROGRAM

APPLICATION

PART I. General Information

Organization Name:

(This is the name that will appear on your sign)

Organization Address: _____

Applicant Name (responsible party): _____

Daytime Number: _____ **Home Number:** _____

Date of Contact: _____ **Email address:** _____

PART II. Roadway Information

On
Roadway: _____

From
Roadway: _____

To
Roadway: _____

Roadway should be a minimum of 2 miles. If unsure about what road to adopt, contact Adopt-A-Highway Coordinator for assistance.

Part III (MCDOT Personnel ONLY)

Approved By: _____ **Approval Date:** _____

Permit # _____ **Maintenance Area:** _____ **BOS District** _____

Stephanie Brown, Adopt-A-Highway Coordinator

Phone: 602-506-4068

Fax: 602-506-3939

2901 West Durango Street

Phoenix, AZ 85009